W300433014

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
W23000051758				





400404968004

03/21/23--01026--013 **150.00

SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 9, 2023

MARIA MORTON COPY*
1600 SARNO ROAD SUITE 1
MELOURNE FL 32935

SUBJECT: AMAX INVESTOR LLC Ref: Number: W23000051758

We have received your document for AMAX INVESTOR LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filling will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace Regulatory Specialist II

alab

Letter Number: 023A00008269

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT:	sulting Florida Lim	uited Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li		tion, and fees are submitted to convert an "Other ay" in accordance with s. 605.1045, F.S.
Please return all correspondence concernin	g this matter to:	
Tobiaz Johansson		
(Contact Person) AMAX Investor, LLC		_
(Firm/Company) 1987 N. Harbor City Blvd.		_
(Address		_
Melbourne, Florida 32935		_
(City, State and Zip Code) tobiaz@amerinsure.net		
E-mail Address: (to be used for future annual re	port notifications)	_
For further information concerning this ma	tter, please call:	
Tobiaz Johansson	at (⁷²⁰) ²⁵²⁻⁷⁷⁴⁷
(Name of Contact Person)	(Area Code	e) (Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the		processed by this office must be payable in US
□ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Co	opy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: AMAX Investor LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
February 26, 2020 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: AMAX Investor LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

- 6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to
 - which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 10 day of March	20_23
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Tobiaz Johansson	Title. Organizer / Member
Signature(s) on hehalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Signature:	Title: Managing Member
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:Printed Name:	_ Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization: Certified Copy:	\$125.00 \$30.00 (Ontional)
Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability C	Omnany is:	
	ompany is.	
AMAX Investor LLC		
	.imited Liability Company, "L.L.C.," or "LLC.")	
(Midsi Colladii die Wolds L	omined blacking Company, E.E.C., of EEC.)	
ARTICLE II - Address:		
The mailing address and street addre	ess of the principal office of the Limited Liability Compa	ny is:
Principal Office Address:	Mailing Address:	
1987 N., Harbor City Blvd.	1987 N. Harbor City Blvd.	
Melbourne, Florida 32935	Melbourne, Florida 32935	
The name and the Florida street add	ress of the registered agent are:	
Dennis Fairbanks		
Dennis Fairbanks	Name	
	Name	
1600 Sarno Road	Name	
1600 Sarno Road	Name , Suite 1 ddress (P.O. Box <u>NOT</u> acceptable)	
1600 Sarno Road Florida street ad Melbourne	Name , Suite 1	
1600 Sarno Road Florida street ad Melbourne	Name I, Suite 1 Iddress (P.O. Box NOT acceptable) FL 32935 ity Zip	
1600 Sarno Road Florida street an Melbourne C Having been named as registered liability company at the place d registered agent and agree to act in statutes relating to the proper and	Name , Suite 1 ddress (P.O. Box <u>NOT</u> acceptable)	nt as ns of all th and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager				
AMBR	Tobiaz Johansson 1987 N. Harbor City Blvd. Melbourne, Florida 32935			
				
				
				
(Use attachment if necessary)				
CLE V: Other provisions, if any.				
p. c				
				
DECLUBED CLONATUDE				
REQUIRED SIGNATURE:				
	<u> </u>			
0 0				
Signature of a member or	an authorized representative of a member			
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware that			
any false information submitted in a docu	ament to the Department of State constitutes a third degree felony			
as provided for in s.817.155, F.S.	•			

Tobiaz Johansson Typed or printed name of signee

Typed or printed name of signee
Filing Fees
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)

Control Number: 20029198

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

> **AMAX Investor LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance, with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the local existence of the above named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima facic evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 24564412 Date Inc/Auth/Filed: 02/26/2020 Jurisdiction Georgia Print Date : 02/18/2023

Form Nümber : 211



Brad Ratorspa

Brad Raffensperger Secretary of State